



City of Greensboro Journeyman Card Application

Date: _____

Last Name: _____

Please **print** and fill in areas completely before presenting for approval. All information must be accurate and legible.

APPLICANT'S INFORMATION

Last Name: _____ First name & Middle Initial: _____

Home Phone: _____ Cell Phone: _____ Employer's Phone: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

CURRENT EMPLOYER'S INFORMATION

Employer: _____

Street Address _____

Phone #: _____ City: _____ State: _____ Zip Code: _____

EMPLOYMENT RECORD; [a minimum of four (4) years of electrical experience, (hands-on), is required].

1. Company _____ Phone # _____ Hours: _____

Duties _____

2. Company: _____ Phone # _____ Hours: _____

Duties: _____

3. Company: _____ Phone # _____ Hours: _____

Duties: _____

4. Company: _____ Phone # _____ Hours: _____

Duties: _____

If you require more space, you may either use an additional sheet or add the information on the back of this form.

NOTE: A fifty dollar (\$50.00) examination fee will be required before sitting for the exam. Do not send payment in advance. Wait until your arrival and check in with the test proctor to take the exam before paying the fee at the Development Services. No fees will be returned. A minimum score of seventy (70) is required to pass the exam. If you score less than 70, you shall be permitted one (1) retake at no additional charge. You are required to bring your notice of the previous attempt in order to retake the exam. The Journeyman card is to be renewed every year with an annual fee of twenty five dollars (\$25.00).

You are required to notify Development Services of a change in address in order to receive your renewal notice.

I certify that all information provided on this application is true and correct to the best of my knowledge. I understand that any false statement made by me may cause me to be ineligible for a journeyman city card and/or revocation of my journeyman city card if previously issued. I authorize the City of Greensboro Inspections to verify the facts of my employment claimed by me on this application. I also authorize my former employers to provide any information requested by City of Greensboro Inspections insofar as my previous employment.

Signed Signature _____